

Family Hul'q'umi'num'

Come join us and experience this great opportunity to learn our language. Register for our introductory classes.

These classes increase our young **Membership's** fluency in Hul'q'umi'num'. Thanks for your understanding.

Date: Tuesday Evenings

Time: 5:00 p.m. – 7:00 p.m.

Place: Quw'utsun Syuw'entst Lelum' (Education Boardroom)

Classes will commence on Tuesday, September 11, 2018.

Our Sul-hween Committee is pleased that we maintain the integrity of our Hul'q'umi'num'. They wish that we continue the Family Hul'q'umi'num' classes to support the valuable works that our families do throughout the year.

Family Hul'q'umi'num' class offers an opportunity to develop understanding of:

- *alphabet, numbers, colours;*
- *basic greetings and daily sayings;*
- *identification of plants, trees, fish, body parts, and animals.*

We will work on monthly, weekly, daily activities and seasonal themes. We will also learn how to write Hul'q'umi'num'. Snacks are provided. We invite you to join us!

Please contact: *Pulaxwulwut*, Dorothy Louie, at Quw'utsun Syuw'entst Lelum' for information at 250.715.1022 ext. 309 or email Dorothy.Louie@cowichantribes.com

Family Language Hul'q'umi'num' 2018-2019 Program Application



Cowichan Tribes
Quw'utsun Syuw'entst Lelum
5744 Allenby Road, Duncan BC V9L 5J1

| Contact Information | | * Cowichan Band Members Only* |
|---------------------------------|-----------------|--------------------------------------|
| Name (First/middle/last) | | |
| Street Address | | |
| City, Street, Postal Code | | |
| Male: " Female: | | |
| Band & Status Number | *(Cowichan) 642 | |
| Home/cell/Work number | | |
| E-Mail Address | | |
| Birthdate: | | |
| Hul'q'umi'num' Sne | | |

| Fluency: Conversational Hul'q'umi'num' | | |
|---|-------|------|
| Speaking & understanding | " Yes | " No |
| Semi-fluent | " Yes | " No |
| Basic Understanding | " Yes | " No |

| Person to Notify in Case of Emergency | |
|--|--|
| Name | |
| Street Address | |
| Home/cell Phone number: | |
| E-mail Address | |

| Additional Information |
|-------------------------------|
| Allergies: |
| |

| Signature | |
|------------------------|-------------------|
| Name (print): | Signature: |
| Date: | |